

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
2							52						
3							53						
4							54						
5							55						
6							56						
7							57						
8							58						
9							59						
10							60						
11							61						
12							62						
13							63						
14							64						
15							65						
16							66						
17							67						
18							68						
19							69						
20							70						
21							71						
22							72						
23							73						
24							74						
25							75						
26							76						
27							77						
28							78						
29							79						
30							80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
TOTAL CLAIMS							TOTAL CLAIMS						

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

871910
Cont.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
/01	1						/51						
/02		1					/52		2				
/03		1					/53		2				
/04							/54		2				
/05							/55		1				
/06							/56	1					
/07							/57	1					
/08							/58		1				
/09							/59		1				
/10							/60		1				
/11		1					/61		1				
/12							/62		2				
/13							/63		2				
/14							/64	1					
/15							/65						
/16							/66						
/17							/67	1					
/18							/68						
/19							/69						
/20							/70						
/21							/71						
/22							/72						
/23							/73	1					
/24							/74	1					
/25							/75						
/26							/76						
/27							/77						
/28							/78						
/29							/79						
/30							/80						
/31							/81						
/32							/82						
/33							/83						
/34							/84						
/35							/85						
/36							/86						
/37							/87						
/38		1					/88						
/39							/89						
/40							/90						
/41							/91						
/42							/92						
/43							/93						
/44							/94						
/45							/95						
/46							/96						
/47							/97						
/48		2					/98						
/49							/99						
/50							/200						
TOTAL IND.	4						TOTAL IND.						
TOTAL DEP.	22						TOTAL DEP.						
TOTAL CLAIMS	26						TOTAL CLAIMS						